

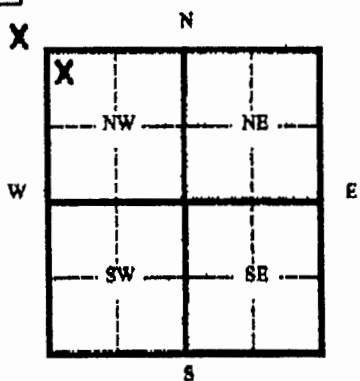
WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID No.

MW-15

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number																																
County: Stafford		NW 1/4 NW 1/4 NW 1/4	22	24 S	15 W																																
Distance and direction from nearest town or city street address of well if located within city? 132 East Broadway, Macksville, KS																																					
2 WATER WELL OWNER: Kinzie Corporation RR#, St. Address, Box # PO Box 464 City, State, ZIP Code : Macksville, KS 67557 Board of Agriculture, Division of Water Resources Application Number:																																					
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF WELL 29.5 ft. WELL'S STATIC WATER LEVEL 23.43 ft. WELL WAS USED AS: 1 Domestic 5 Public Water Supply 9 Dewatering 2 Irrigation 8 Oil Field Water Supply 10 Monitoring Well 3 Feedlot 7 Lawn and Garden (domestic) 11 Injection Well 4 Industrial 8 Air Conditioning 12 Other _____																																			
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No _____ If yes, mo/day/yr sample was submitted _____ Water Well Disinfected: Yes _____ No _____																																			
5 TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below) 2 PVC 4 ABC 6 Asbestos-Cement 8 Concrete Tile Blank casing diameter 2 in. Was casing pulled? Yes X No _____ If yes, how much removed 3 ft Casing height above or below land surface -36 in.																																					
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____ Grout Plug Intervals From 0 ft. to 29.5 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. What is the nearest source of possible contamination: 1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below) _____ 2 Sewer lines 7 Pit privy 12 Fertilizer storage _____ 3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage _____ 4 Lateral lines 9 Feedyard 14 Abandoned water well _____ 5 Cess Pool 10 Livestock pens 15 Oil well/ Gas well _____ Direction from well? _____ How many feet? _____																																					
<table border="1"><thead><tr><th>FROM</th><th>TO</th><th>CODE</th><th>PLUGGING MATERIALS</th></tr></thead><tbody><tr><td>0</td><td>29.5</td><td></td><td>Bentonite grout</td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr></tbody></table>						FROM	TO	CODE	PLUGGING MATERIALS	0	29.5		Bentonite grout																								
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) 11/6/08 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 554 This Water Well Record was completed on (mo/day/yr) 11/17/08 under the business name of Nilchit Bluestem Environmental Engineering, Inc. by (signature) _____																																					
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66620-0001. Telephone: 785-296-3565. Send one to Water Well Owner and retain one for your records.																																					